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Review Article

VICHARCHIKA: A COMPREHENSIVE REVIEW OF ITS AYURVEDIC CONCEPTS AND MANAGEMENT

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ABSTRACT

Vicharchika is described in Ayurveda as a type of *Kshudra Kushtha* characterized by pruritus (*Kandu*), skin eruptions (*Pidika*), discoloration (*Shyava*) and discharge (*Srava*). Its clinical manifestations may affect physical comfort and quality of life. **Aim and Objective:** To review the classical Ayurvedic concepts of *Vicharchika*, including its *Nidana, Purvarupa, Rupa, Samprapti, Pathya-Apathya* and *Chikitsa* and to provide a comprehensive understanding of its management according to Ayurvedic principles. **Materials and Methods:** This review is based on the study of classical Ayurvedic literature, including *Charaka Samhita, Sushruta Samhita, Ashtanga Hridaya, Ashtanga Sangraha*, *Kashyapa Samhita* and other relevant texts, along with a contemporary review article on *Vicharchika* and its management. **Results:** *Vicharchika* is associated with the vitiation of *Tridosha*, with *Kapha* and *Pitta* predominance described in several classical texts. The involvement of *Twaka*, *Rakta*, *Mamsa*, and *Lasika* is considered important in its *Samprapti*. The principal clinical features include *Kandu, Pidika, Shyavata* and *Srava*, along with other manifestations such as *Raji*, *Ruja*, *Rukshata* and *Paka*. Ayurvedic management includes *Dosha*-specific *Shodhana Chikitsa*, *Shamana Chikitsa* and appropriate *Pathya-Apathya* measures. Classical descriptions also mention specific formulations and local applications for *Kushtha* and *Vicharchika*. **Conclusion:** The classical Ayurvedic approach to *Vicharchika* emphasizes an individualized understanding of *Dosha* predominance, disease manifestations, etiological factors, dietary practices and therapeutic measures. A systematic review of these principles provides a foundation for understanding the Ayurvedic perspective on *Vicharchika* and may support further clinical research into its management.

INTRODUCTION

Ayurveda, the traditional Indian system of medicine, encompasses a comprehensive body of knowledge concerning health, disease prevention and therapeutic management. Its fundamental principles and treatment modalities have evolved over centuries through systematic observations, clinical experiences and the documentation of traditional medical practices. Within the Ayurvedic framework, the understanding of the structural and functional aspects of the human body, including the skin, is integral to the assessment and management of various disease conditions.

The skin is the largest organ of the human body, covering its entire external surface and accounting for approximately 16–20% of total body weight. It constitutes the principal component of the integumentary system and performs several essential physiological functions, including protection against mechanical and chemical injuries, microbial invasion, and harmful solar radiation. Furthermore, it plays a vital role in maintaining fluid and electrolyte balance by limiting excessive trans epidermal water loss[1]. Beyond its physiological functions, the skin contributes significantly to physical appearance, social interaction, and psychological well-being. In contemporary society, urbanization, changing dietary habits, sedentary

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lifestyles, psychological stress, inadequate sleep and environmental pollution have been recognized as important factors that may influence skin health and contribute to the increasing burden of dermatological disorders.

In Ayurvedic literature, *Twaka* is described as an important anatomical and functional component of the body and is regarded as the *Adhisthana* (seat) of *Sparshanendriya*, which facilitates the perception of tactile sensations (*Sparsha Jnana*)[2]. Concept of *Twaka Utpatti* and the classification of its layers have been elaborated upon in classical Ayurvedic texts. According to *Charaka Samhita*, the skin develops in association with *Rasa Dhatu* and comprises the five fundamental elements (*Panchamahabhutas*), whose relative contributions are understood to determine its structural and functional characteristics.[3] *Acharya Sushruta* described seven layers of *Twaka*, namely *Avabhasini, Lohita, Shweta, Tamra, Vedini, Rohini* and *Mamsadhara*, and correlated different pathological manifestations with their respective layers.[4] These classical descriptions provide a conceptual foundation for understanding skin disorders within the Ayurvedic system of medicine.

In Ayurveda, *Kushtha* represents a broad category of disorders primarily involving the skin and is described through a diverse range of clinical manifestations. Classical texts classify *Kushtha* into eighteen major types, comprising seven *Maha Kushtha* and eleven *Kshudra Kushtha*, based on their characteristic features and traditional classification[5]. Among the *Kshudra Kushtha*, *Vicharchika* is an important clinical entity described in major Ayurvedic treatises, including *Charaka Samhita, Sushruta Samhita* and *Ashtanga Hridaya*. It is characterized by manifestations such as pruritus, skin eruptions, discoloration and exudation, which may significantly affect an individual's physical comfort and quality of life. The condition is also discussed in relation to *Rakta -Pradoshaja Vikara* and is classified among *Sadhya Kushtha* in the relevant classical descriptions[6]. Its clinical presentation, recurrent nature and impact on daily activities make it an important subject for further investigation, particularly in the context of chronic dermatological conditions.

Classical Definition of *Vicharchika*

Vicharchika is described in Ayurvedic literature as a type of skin disorder characterized by various manifestations, including eruptions, discoloration, pruritus, discharge and alterations in skin texture. The classical descriptions provided by different *Acharyas* highlight distinct clinical features of the condition.[7]

According to *Acharya Charaka*, *Vicharchika* is characterized by dark-coloured skin eruptions accompanied by itching and profuse discharge[8]. *Acharya Sushruta* described the condition as presenting with linear markings, roughness, intense pruritus and pain. He further described *Vipadika* as a condition primarily affecting the feet and associated with characteristic fissuring[9].

The descriptions in *Ashtanga Hridaya* and *Ashtanga Sangraha* emphasize blackish eruptions accompanied by severe itching and excessive serous discharge, referred to as *Lasikadhya*[10,11]. Similarly, *Acharya Kashyapa* described *Vicharchika* as a condition involving dark reddish-brown lesions associated with itching, pain, and suppurative changes[12]. Another classical description highlights dark reddish lesions with deeper tissue involvement, referred to as *Mamsenopachita*, accompanied by oozing or discharge[13]. A comparative assessment of these descriptions reveals that pruritus, discoloured eruptions, exudation, dryness, pain and changes in skin texture are among its principal manifestations. These variations provide a broader understanding of the clinical spectrum of *Vicharchika* within the Ayurvedic system of medicine.

Nidana* of *Vicharchika

The etiological factors (*Nidana*) of *Vicharchika* vary among different *Acharyas*. According to *Acharya Sushruta*, *Pitta* is predominant, whereas *Acharya Charaka* and *Acharya Vagbhata* emphasize the role of *Kapha*. However, *Acharya Charaka* states that *Kushtha* does not arise from a single *Dosha* alone but involves the three *Doshas* (*Vata, Pitta* and *Kapha*) along with *Twaka, Rakta, Mamsa* and *Ambu*, collectively known as *Sapta Dravya* Sangraha[14,15]. Etiological factors of *Vicharchika* can therefore be classified into three categories: *Aharaja* (dietary factors), *Viharaja* (lifestyle factors) and *Acharaja* (conduct-related factors).

- ***Aharaja Nidana***
  - *Ahara* is essential for the nourishment, growth, maintenance and repair of body tissues. According to *Acharya Charaka* and *Acharya Sushruta*, wholesome food promotes health and well-being, whereas improper dietary practices contribute to disease manifestation. *Viruddha, Mithya, Ahita, Asatmya* and *Apathya Ahara* are considered important dietary factors in the pathogenesis of *Kushtha*[16-22].
- ***Viruddha Ahara*:** It refers to incompatible dietary substances or combinations that aggravate the *Doshas* and may contribute to disease manifestation. *Acharya Vagbhatta* compared its effects to *Visha* and *Gara*, while *Acharya Charaka* associated its consumption with several disorders, including *Kushtha*[23-26].

- ***Mithya Ahara*:** It denotes improper dietary practices, including inappropriate food quantity, quality, timing and method of consumption. Deviation from the eight principles of *Ashta Ahara Vidhi Vishesha Ayatana* may impair digestion and contribute to disease development.[27-29]
- ***Ahita, Asatmya* and *Apathya Ahara*:** These refer to foods that are unsuitable, incompatible with an individual's constitution or detrimental to health. Excessive consumption of *Navana, Dadhi, Matsya* and foods rich in *Lavana* and *Amla Rasa* is described among the dietary factors associated with *Kushtha*[30-32].
- ***Samashana*:** The simultaneous consumption of wholesome (*Hita*) and unwholesome (*Ahita*) food is termed *Samashana.*[33,34]
- ***Adhyashana*:** It refers to eating before the previously consumed meal has been digested. Repeated *Adhyashana* may impair *Agni* and contribute to digestive disorders.[35,36]
- ***Vishamashana*:** It involves consuming food at inappropriate times or in unsuitable quantities, potentially resulting in *Agni Vaishamya*.[37,38]
- ***Santarpaka Nidana*:** Excessive intake of *Snigdha, Madhura, Guru,* and *Picchila Ahara*, along with certain animal products, dairy preparations, and daytime sleeping, is associated with *Santarpanottha Vikara*, including *Kushtha*. Excessive consumption of *Lavana Rasa* is also described as a contributing factor in *Vicharchika.*[39,40]

Incompatible dietary practices may impair *Jatharagni*, leading to indigestion and the formation of *Ama*. According to Ayurvedic principles, these disturbances may contribute to *Tridosha* vitiation and dysfunction of the *Srotas*.[41-43] Furthermore, persistent *Ajirna* and *Adhyashana* may aggravate *Agnimandya* and affect *Rakta*, potentially contributing to the development of *Kushtha*[44].

***Viharaja Nidana*[45]**

Viharaja Nidana refers to improper lifestyle practices and activities that may contribute to the manifestation of *Vicharchika*.

- ***Mithya Vihara*:** *Mithya Vihara* includes inappropriate physical activities and behavioural practices, such as exercising or taking sunbaths immediately after heavy meals, performing strenuous activities after *Snehapana* or *Vamana* etc. Sudden exposure to extreme temperature changes and entering cold water after physical exhaustion, fear or prolonged sun exposure are also described as improper practices.
- ***Vega-Vidharana:*** *Vega-Vidharana* refers to the voluntary suppression of natural bodily urges. Suppression of the urge to vomit (*Chhardi Vega*), urination (*Mutra Vega*) and defecation (*Purisha Vega*) is considered an inappropriate behavioural practice in Ayurvedic literature.
- ***Panchakarma Apacharana*:** *Panchakarma Apacharana* refers to improper administration of *Panchakarma* procedures, including non-adherence to prescribed dietary and behavioural restrictions during treatment and the inappropriate administration of *Snehapana*. Such practices are considered potential factors in the disturbance of normal physiological functions.

Acharaja Nidana

Acharaja Nidana refers to improper conduct and unethical practices considered contributory factors in the manifestation of disease according to *Ayurvedic* literature. These include disrespect towards *Brahmanas*, *Guru* and other respected individuals, engagement in unrighteous activities and the use of wealth or material acquired through unjust means.

Purvarupa* of *Vicharchika

Classical Ayurvedic texts do not explicitly describe the specific *Purvarupa* of *Vicharchika*. However, as it is classified under *Kshudra Kushtha*, the general premonitory features of *Kushtha* may be considered applicable. These include *Asweda*, *Swedadhikya*, *Atislakshnata*, *Vaivarnyata*, *Toda*, *Suptata*, *Paridaha/ Daha*, *Pariharsha*, *Ushmayana*, *Gaurava*, *Shwayathu* and *Visarpana*.

Rupa* of *Vicharchika [46-50]

Rupa, that is, signs and symptoms of *Vicharchika*, as stated by different *Acharyas* can be summarized in the following Table 1.

Table 1: Clinical Features (*Rupa*) of *Vicharchika* in Different Ayurvedic Texts

S.No.	*Rupa*	*CS*	*SS*	*AH*	*AS*	*BS*	*KS*	*MN*	*BP*
1	*Kandu*	+	+	+	+	+	+	–	–
2	*Pidika*	+	+	+	+	–	–	–	–
3	*Shyava*	+	+	+	+	–	–	–	–

4	*Srava*	+	+	+	+	+	+	+	–
5	*Raji*	+	+	–	–	–	–	–	–
6	*Ruja*	+	+	–	–	–	–	–	–
7	*Rukshata*	+	–	–	–	–	–	–	–
8	*Rakta*	+	+	–	–	–	–	–	–
9	*Praklina*	+	–	–	–	–	–	–	–
10	*Vrana*	+	–	–	–	–	–	–	–
11	*Paka*	+	–	–	–	–	–	–	–

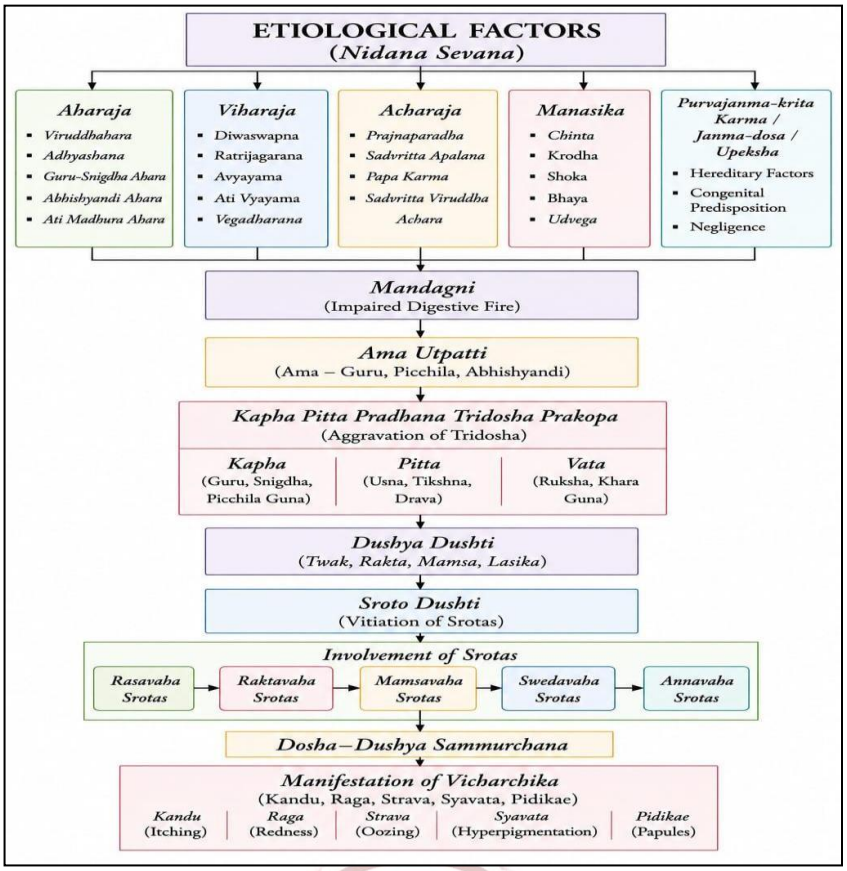
Abbreviations: CS – Charaka Samhita; SS – Sushruta Samhita; AH – Ashtanga Hridaya; AS – Ashtanga Sangraha; BS – Bhava Prakasha; KS – Kashyapa Samhita; MN – Madhava Nidana; BP – Bhaishajya Ratnavali.

Note: "+" indicates the presence and "–" indicates the absence of the feature, as represented in your original table. Please verify the abbreviations against your cited references.

- *Kandu*: Intense itching, primarily associated with vitiated *Kapha Dosha*, is a cardinal feature of *Vicharchika* and may also occur as a *Purvarupa* of *Kushtha*.
- *Pidika*: Refers to skin eruptions, often associated with inflammation and redness due to vitiated *Pitta Dosha*.
- *Bahu Srava*: Denotes profuse discharge from lesions. Vitiated *Pitta* and *Kapha* are associated with excessive watery exudation (*Lasikadhya*). Predominant *Vata* may produce dry lesions, whereas *Kapha* and *Pitta* may contribute to wet lesions.
- *Shyava*: Refers to dark-brown or blackish discoloration of lesions, traditionally associated with vitiated *Vata Dosha*.
- *Raji*: Indicates linear markings or furrows, which may develop due to thickening or repeated scratching and are associated with *Vata Dosha*.
- *Ruja*: Refers to pain or discomfort, traditionally attributed to vitiated *Vata Dosha*.
- *Rukshata*: Denotes dryness and roughness of the skin, primarily associated with vitiated *Vata Dosha*.
- *Rakta*: Refers to redness of the lesions, associated with vitiated *Pitta Dosha*. *Bhela Samhita* describes this feature, while *Kashyapa Samhita* uses the term, *Lohita*.
- *Praklinna*: Indicates excessive moisture or *Kleda* due to persistent discharge and is associated with vitiated *Kapha* and *Pitta Dosha*.
- *Vrana*: Refers to ulcerated lesions or skin cracks, which may develop following repeated scratching. This feature is described in *Kashyapa Samhita*.
- *Paka*: Denotes suppuration of lesions, potentially accompanied by purulent discharge and is traditionally associated with vitiated *Pitta Dosha*.

Samprapti* of *Vicharchika

According to Ayurvedic principles, the pathogenesis (*Samprapti*) of *Vicharchika* begins with the consumption of unwholesome food (*Aharaja Nidana*), improper lifestyle practices (*Viharaja Nidana*), psychological factors (*Manasika Nidana*) and other predisposing factors. These factors contribute to *Agnimandya* (impaired digestive fire), resulting in the formation of *Ama*. Subsequently, the vitiation of *Tridosha*, particularly *Kapha* and *Pitta*, along with *Vata*, leads to *Dushya Dushti* involving *Twak, Rakta, Mamsa* and *Lasika*. The disturbed *Doshas* and affected *Dushyas* produce *Srotodushti* and *Dosha-Dushya Sammurchana*, ultimately resulting in the manifestation of *Vicharchika*. Its characteristic clinical features include *Kandu* (itching), *Pidika* (eruptions), *Shyavata* (dark discoloration), *Srava* (discharge), *Raga* (redness) and other associated skin manifestations[51].



Samprapti Ghataka* of *Vicharchika

No.	*Samprapti Ghataka*	Description
1	*Doṣha*	*Kapha-Pitta Pradhana Tridoṣhaja*
2	*Duṣhya*	*Twaka, Rakta, Mamsa, Lasika*
3	*Agni*	*Jatharagni* and *Dhatvagni Mandya*
4	*Srotasa*	*Rasavaha, Raktavaha, Mamsavaha, Swedavaha, Udakavaha*
5	*Srotoduṣṭi*	*Sanga* and *Vimargagamana*
6	*Saṃchara Sthana*	*Tiryagami Sira*
7	*Adhiṣṭhana*	*Twaka*
8	*Rogamarga*	*Bahya*
9	*Prabhava*	*Chirakari*

Dosha Pradhanta* according to various *Acharyas

Dominant *Doshas*	*Ch.*	*Su.*	*A.H.*	*A.S.*
Kapha	+	–	+	+
Pitta	–	+	–	–
Vata	–	–	–	–

***Pathya* and *Apathya* in *Vicharchika*[52]**

S.No.	*Pathya*	S. No.	*Apathya*
1	*Laghu Anna*	1	*Guru Anna*
2	*Tikta Shaka*	2	*Dugdha*
3	*Purana Dhanya*	3	*Dadhi*
4	*Jangala Mansa*	4	*Amla Rasa*

5	*Ghrita*	5	*Guda*
6	*Mudga*	6	*Tila*
7	*Triphala*	7	*Anupa Mansa*
8	*Bhallataka*	8	*Matsya*
9	*Nimba*	9	*Mansa and Vasa*
10	*Patola*	10	*Taila*

Chikitsa* of *Vicharchika

Vicharchika is described under *Kushtha Roga* in Ayurveda. According to Ayurvedic principles, *Kushtha* involves the vitiation of *Tridosha*; therefore, the line of treatment should be determined according to the predominance of *Dosha*, the clinical features and the patient's condition. Initially, the predominant vitiated *Dosha* should be alleviated, followed by the management of the remaining vitiated *Doshas*. The treatment of *Kushtha* includes *Shodhana Chikitsa*, *Shamana Chikitsa* and other measures according to the disease condition.

***Dosha*-wise treatment**

The treatment principles for different *Dosha*-dominant varieties of *Kushtha* are described as follows:

***Dosha* or disease condition**	**Treatment**
Vata-pradhana Kushtha	*Sarpipana* (administration of *Ghrita*)
Pitta-pradhana Kushtha	*Virechana* and *Raktamokshana*
Shleshma-pradhana Kushtha	*Vamana* and *Pracchana*
Alpa Dosha-yukta Kushtha	*Siravyadha*
Bahu Dosha / Bahudosha Avastha	*Samshodhana* therapies

Shodhana Chikitsa

Shodhana Chikitsa is described for the elimination of vitiated *Doshas* in *Kushtha*. According to *Sushruta*, treatment should be initiated during the *Purvarupa* stage itself. During this stage, *Ubhaya Bhaga Shodhana*, comprising *Vamana* and *Virechana*, is recommended (Su. Chi. 9/6).

- ***Snehapana:*** *Snehapana* is administered initially before *Vamanadi Shodhana* procedures, with the type of *Sneha* selected according to the *Dosha* and disease condition (Dalhana on Su. Chi. 9/6). *Tuvaraka* and *Bhallataka Sneha* are described as useful in different varieties of *Kushtha* (Su. Chi. 9/7). *Madhyama Matra* of *Sneha* is recommended in *Kushtha* (Cha. Su. 13/34). *Swedana* is considered beneficial in *Vataja Kushtha* (Ha. Sa. 3/39/20).
- ***Swedana:*** According to *Charaka*, when *Kushtha* lesions are *Sthira*, *Kathina* and *Mandala*, *Swedana* may be performed using *Prastara* and *Nadi* methods (Cha. Chi. 7/50).
- ***Vamana Karma:*** When the *Doshas* are situated in the *Hridaya* or central region of the body and are in a state of *Utklesha*, *Vamana* is indicated in *Kushtha* affecting the upper part of the body. Drugs such as *Kutaja*, *Madanaphala* and *Madhuka*, combined with the decoctions of *Patola* and *Nimba*, are described for this purpose (Cha. Chi. 7/43).
- ***Virechana Karma:*** Drugs such as *Trivrita*, *Danti* and *Triphala* are described for *Virechana*. When *Vata* and *Kapha* are situated in the *Pitta Sthana*, *Vamana* and *Virechana* may be considered; when *Pitta* and *Kapha* are localized in the *Vata Sthana, Virechana* is indicated according to the condition. *Samsarjana Krama* should be followed as appropriate after the procedure (Cha. Chi. 7/45).
- ***Basti Karma***

  Asthapana Basti: In conditions involving excessive *Vayu*, *Asthapana Basti* with drugs such as *Darvi* and *Brihati* is described (Cha. Chi. 7/46).

  Anuvasana Basti: When *Vayu* remains aggravated even after *Virechana* and *Asthapana Basti*, *Anuvasana Basti* containing *Madanaphala* and *Madhuka* may be considered in an appropriate patient (Cha. Chi. 7/47). Although *Basti* is generally contraindicated in *Kushtha* according to the cited passage, its use may depend on the specific clinical circumstances (Cha. Vi. 8/138).
- *Nasya: Nasya* with drugs such as *Saindhava, Danti* and *Maricha* is described for conditions associated with *Kushtha, Krimi* and *Kapha* aggravation (Cha. Chi. 7/48).
- *Dhumapana: Virechanika Dhumapana* is described for disorders such as *Krimi*, *Kushtha* and *Kilasa* affecting the *Shira* (Cha. Chi. 7/49).

Raktamokshana

Raktamokshana is described in the management of *Kushtha*, particularly according to the lesion characteristics and the predominance of *Dosha*.

Shamana Chikitsa

Shamana Chikitsa aims to alleviate the vitiated *Doshas* and manage the manifestations of *Kushtha*. *Guduchi Swarasa, Guduchi Kwatha* or *Guduchi Siddha Ghrita* administered in the early morning for one month is described as beneficial in different varieties of *Kushtha* (Su. Chi. 10/14). A decoction prepared from *Darvi, Khadira* and *Nimba* is also described as *Kushtahara* (A. H. Chi. 19/37).

Tuvaraka, Bhallataka, Bakuchi, Chitrakamula and *Shilajatu* are mentioned for *Rasayana Prayoga* in *Kushtha*.

Kshara Prayoga* and *Avachurnana

According to the cited description, in anaesthetic patches of *Kushtha*, *Shastra* is contraindicated and *Kshara* is described after the elimination of blood and *Doshas* (Cha. Chi. 7/54). The application of *Lepa* in *Kushtha* is described as more efficacious after the elimination of impurities from the blood and *Koshtha* (Cha. Chi. 7/53).

Drugs mentioned for *Avachurnana* in *Vicharchika* include *Kustha, Amrutasanga, Daruharidra, Kasisa, Kampillaka, Musta, Lodhra, Sougandhika, Sarja Rasa, Vidanga, Manashila, Haratala,* and *Karaveera Twak* (Cha. Su. 3/11).

Daivavyapashraya Chikitsa

Daivavyapashraya Chikitsa is also described in the classical management of *Kushtha*. Measures include *Vrata, Dama, Yama, Guruseva, Tyaga, Shilabhiyoga*, worship of *Dwijas, Suras* and *Guru*, *Maitri* towards all living beings and *Aradhana* of *Shiva*, *Kartikeya*, *Tara* and *Bhaskara*. *Tapopasevana* is mentioned as a measure for alleviating *Kushtha* (Su. Ni. 5/31), while *Karmakshaya* is described in relation to the disease (Cha. Sha. 1/117). Harita mentions *Dana* of *Go*, *Bhumi*, *Swarna* or *Anna* for *Kushtha* attributed to *Papakarma* (Ha. Dwi. 1).

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